

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE	(PLANT JOB NUMBER)				
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y						EST. COST	
FOR REFERENCE CONSULT										PHONE	
SCHEDULED COMPLETION DATE										ESTIMATED COST	
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Act'y	Trans Type	Property Acct'g Act'y	Cost Code	FUNDING AUTHORIZATION		
								BASIC REQ'N NO. AMOUNT			
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>											
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.		
ENCLOSURES <i>(Submit clean, well protected copy)</i> <i>(If other, specify)</i>						PROOFS <i>(Specify only if necessary)</i>					
PAGES COPY		NEGA-TIVES	PLATES		<input type="checkbox"/> NOT REQ'D		SEND TO:				
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>		INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*	COLOR*	
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>				1.				
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number <input type="checkbox"/> UPPER LEFT <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>				2.				
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>				3.				
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT		PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.				
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>		WRAP <i>(No. per pkg.)</i>				5.				
							6.				
<div style="display: flex; justify-content: space-between;"> <div> FOR PLANT USE ONLY </div> <div> SPECIAL INSTRUCTIONS/REMARKS </div> </div>											
NUMBER ORIG.		LINE H.T.						SERIAL NUMBERING, REGISTRATION, ETC.			
IMAGE SIZE X											
PRESS	PLATES	IMP.									
PRESS SHEET SIZE X								DISTRIBUTION REQUIRED <input type="checkbox"/> LIST / <input type="checkbox"/> LABELS ATTACHED WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD			
TRIM SIZE X											
PLANNED BY											
ORDERING OFFICE <i>(If other than delivery address)</i>						DELIVER TO <i>(Complete address)</i> MATERIAL RECEIVED <i>(Signature and date)</i>					
LIASON OFFICE APPROVAL <i>(Signature and date)</i>											
APPROVING OFFICE <i>(Signature and date)</i>											
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>											

(PRODUCTION COPY)

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE					
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y			EST. COST		(PLANT JOB NUMBER)		
FOR REFERENCE CONSULT					PHONE		SCHEDULED COMPLETION DATE		ESTIMATED COST		
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Acty		Trans Type	Property Acct'g Acty	Cost Code	FUNDING AUTHORIZATION	
									BASIC REQN NO.	AMOUNT	
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>											
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.		
ENCLOSURES <i>(Submit clean, well protected copy)</i>					<i>(If other, specify)</i>			PROOFS <i>(Specify only if necessary)</i>			
PAGES COPY		NEGA-TIVES	PLATES		<input type="checkbox"/> NOT REQ'D			SEND TO:			
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>			INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*	COLOR*
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>					1.			
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number Stitches: <input type="checkbox"/> UPPER LEFT <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>					2.			
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>					3.			
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT			PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.			
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>					WRAP <i>(No. per pkg.)</i>		5.			
								6.			
							7.				
								*NOTE: Grades and weight of paper will be in accordance with specifications issued by the Congressional Joint Committee on printing. No deviations permitted unless justified.			
FOR PLANT USE ONLY								SPECIAL INSTRUCTIONS/REMARKS			
NUMBER ORIG.		LINE H.T.						SERIAL NUMBERING, REGISTRATION, ETC.			
IMAGE SIZE X											
PRESS	PLATES	IMP.									
PRESS SHEET SIZE X											
TRIM SIZE X											
PLANNED BY											
ORDERING OFFICE <i>(If other than delivery address)</i>								DELIVER TO <i>(Complete address)</i>			
LIASON OFFICE APPROVAL <i>(Signature and date)</i>											
APPROVING OFFICE <i>(Signature and date)</i>											
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>											
<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border-bottom: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; top: 0; right: 0; width: 50%; height: 50%; border-top: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; bottom: 0; left: 0; width: 50%; height: 50%; border-bottom: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; bottom: 0; right: 0; width: 50%; height: 50%; border-top: 1px solid black; border-right: 1px solid black;"></div> </div>								DISTRIBUTION REQUIRED <input type="checkbox"/> LIST / <input type="checkbox"/> LABELS ATTACHED			
								WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD			
								MATERIAL RECEIVED <i>(Signature and date)</i>			

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE					
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y			EST. COST		(PLANT JOB NUMBER)		
FOR REFERENCE CONSULT					PHONE		SCHEDULED COMPLETION DATE		ESTIMATED COST		
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Acty		Trans Type	Property Acct'g Acty	Cost Code	FUNDING AUTHORIZATION	
									BASIC REQN NO.	AMOUNT	
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>											
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.		
ENCLOSURES <i>(Submit clean, well protected copy)</i>					<i>(If other, specify)</i>			PROOFS <i>(Specify only if necessary)</i>			
PAGES COPY		NEGA-TIVES	PLATES		<input type="checkbox"/> NOT REQ'D			SEND TO:			
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>			INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*	COLOR*
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>					1.			
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number <input type="checkbox"/> UPPER <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>					2.			
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>					3.			
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT			PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.			
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>					WRAP <i>(No. per pkg.)</i>		5.			
								6.			
							7.				
								*NOTE: Grades and weight of paper will be in accordance with specifications issued by the Congressional Joint Committee on printing. No deviations permitted unless justified.			
FOR PLANT USE ONLY								SPECIAL INSTRUCTIONS/REMARKS			
NUMBER ORIG.		LINE H.T.						SERIAL NUMBERING, REGISTRATION, ETC.			
IMAGE SIZE X											
PRESS	PLATES	IMP.									
PRESS SHEET SIZE X											
TRIM SIZE X											
PLANNED BY											
ORDERING OFFICE <i>(If other than delivery address)</i>								DELIVER TO <i>(Complete address)</i>			
LIASON OFFICE APPROVAL <i>(Signature and date)</i>											
APPROVING OFFICE <i>(Signature and date)</i>											
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>											
<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border-bottom: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; top: 0; right: 0; width: 50%; height: 50%; border-top: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; bottom: 0; left: 0; width: 50%; height: 50%; border-bottom: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; bottom: 0; right: 0; width: 50%; height: 50%; border-top: 1px solid black; border-right: 1px solid black;"></div> </div>								DISTRIBUTION REQUIRED <input type="checkbox"/> LIST / <input type="checkbox"/> LABELS ATTACHED			
								WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD			
								MATERIAL RECEIVED <i>(Signature and date)</i>			

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE	(PLANT JOB NUMBER)				
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y						EST. COST	
FOR REFERENCE CONSULT										PHONE	
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Acty					Trans Type	Property Acct'g Acty
									BASIC REQN NO. AMOUNT		
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>											
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.		
ENCLOSURES <i>(Submit clean, well protected copy)</i> <i>(If other, specify)</i>						PROOFS <i>(Specify only if necessary)</i>					
PAGES COPY		NEGA-TIVES	PLATES		<input type="checkbox"/> NOT REQ'D		SEND TO:				
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>			INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*	COLOR*
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>					1.			
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number <input type="checkbox"/> UPPER <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>					2.			
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>					3.			
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT			PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.			
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>					WRAP <i>(No. per pkg.)</i>		5.			
								6.			
							7.				
FOR PLANT USE ONLY						SPECIAL INSTRUCTIONS/REMARKS					
NUMBER ORIG.		LINE H.T.					SERIAL NUMBERING, REGISTRATION, ETC.				
IMAGE SIZE X											
PRESS	PLATES	IMP.									
PRESS SHEET SIZE X											
TRIM SIZE X											
PLANNED BY											
ORDERING OFFICE <i>(If other than delivery address)</i>						DELIVER TO <i>(Complete address)</i>					
LIASON OFFICE APPROVAL <i>(Signature and date)</i>											
APPROVING OFFICE <i>(Signature and date)</i>											
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>											
<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border-bottom: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; top: 0; right: 0; width: 50%; height: 50%; border-top: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; bottom: 0; left: 0; width: 50%; height: 50%; border-bottom: 1px solid black; border-right: 1px solid black;"></div> <div style="position: absolute; bottom: 0; right: 0; width: 50%; height: 50%; border-top: 1px solid black; border-right: 1px solid black;"></div> </div>						DISTRIBUTION REQUIRED <input type="checkbox"/> LIST <input type="checkbox"/> LABELS ATTACHED					
						WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD					
						MATERIAL RECEIVED <i>(Signature and date)</i>					

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE					
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y			EST. COST		(PLANT JOB NUMBER)		
FOR REFERENCE CONSULT					PHONE		SCHEDULED COMPLETION DATE				ESTIMATED COST
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Acty		Trans Type	Property Acct'g Acty	Cost Code	FUNDING AUTHORIZATION	
									BASIC REQN NO. AMOUNT		
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>											
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.		
ENCLOSURES <i>(Submit clean, well protected copy)</i> <i>(If other, specify)</i>					PROOFS <i>(Specify only if necessary)</i> <input type="checkbox"/> NOT REQ'D SEND TO:						
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>			INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*	COLOR*
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>					1.			
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number <input type="checkbox"/> UPPER <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>					2.			
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>					3.			
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT			PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.			
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>					WRAP <i>(No. per pkg.)</i>		5.			
								6.			
							7.				
								*NOTE: Grades and weight of paper will be in accordance with specifications issued by the Congressional Joint Committee on printing. No deviations permitted unless justified.			
FOR PLANT USE ONLY								SPECIAL INSTRUCTIONS/REMARKS			
NUMBER ORIG.		LINE H.T.						SERIAL NUMBERING, REGISTRATION, ETC.			
IMAGE SIZE X											
PRESS	PLATES	IMP.									
PRESS SHEET SIZE X											
TRIM SIZE X											
PLANNED BY											
ORDERING OFFICE <i>(If other than delivery address)</i>								DELIVER TO <i>(Complete address)</i>			
LIAISON OFFICE APPROVAL <i>(Signature and date)</i>											
APPROVING OFFICE <i>(Signature and date)</i>											
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>											
<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 10px; left: 10px;">┌</div> <div style="position: absolute; top: 10px; right: 10px;">┐</div> <div style="position: absolute; bottom: 10px; left: 10px;">└</div> <div style="position: absolute; bottom: 10px; right: 10px;">┘</div> </div>								DISTRIBUTION REQUIRED <input type="checkbox"/> LIST / <input type="checkbox"/> LABELS ATTACHED			
								WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD			
								MATERIAL RECEIVED <i>(Signature and date)</i>			

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE					
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y			EST. COST		(PLANT JOB NUMBER)		
FOR REFERENCE CONSULT					PHONE		SCHEDULED COMPLETION DATE				ESTIMATED COST
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Acty		Trans Type	Property Acct'g Acty	Cost Code	FUNDING AUTHORIZATION	
									BASIC REQN NO. AMOUNT		
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>											
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.		
ENCLOSURES <i>(Submit clean, well protected copy)</i>					<i>(If other, specify)</i>			PROOFS <i>(Specify only if necessary)</i>			
PAGES COPY		NEGA-TIVES	PLATES		<input type="checkbox"/> NOT REQ'D			SEND TO:			
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>		INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*	COLOR*	
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>				1.				
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number Stitches: <input type="checkbox"/> UPPER LEFT <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>				2.				
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>				3.				
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT		PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.				
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>					WRAP <i>(No. per pkg.)</i>		5.			
								6.			
							7.				
							*NOTE: Grades and weight of paper will be in accordance with specifications issued by the Congressional Joint Committee on printing. No deviations permitted unless justified.				
							DISPOSITION OF NEGS. _____ ORIG. _____ H - HOLD D - DESTROY R - RETURN				
FOR PLANT USE ONLY											
NUMBER ORIG.		LINE H.T.							SPECIAL INSTRUCTIONS/REMARKS		
IMAGE SIZE X									SERIAL NUMBERING, REGISTRATION, ETC.		
PRESS	PLATES	IMP.									
PRESS SHEET SIZE X											
TRIM SIZE X											
PLANNED BY											
ORDERING OFFICE <i>(If other than delivery address)</i>											
LIAISON OFFICE APPROVAL <i>(Signature and date)</i>											
APPROVING OFFICE <i>(Signature and date)</i>											
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>											
<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 10px; left: 10px;">┌</div> <div style="position: absolute; top: 10px; right: 10px;">┐</div> <div style="position: absolute; bottom: 10px; left: 10px;">└</div> <div style="position: absolute; bottom: 10px; right: 10px;">┘</div> </div>							DISTRIBUTION REQUIRED <input type="checkbox"/> LIST <input type="checkbox"/> LABELS ATTACHED				
							WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD				
							MATERIAL RECEIVED <i>(Signature and date)</i>				

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>				FOR PLANT USE																																
REQUISITION NO.		DATE OF REQUEST		REQUESTED DEL'Y						EST. COST																												
FOR REFERENCE CONSULT					PHONE																																	
									(PLANT JOB NUMBER)																													
								SCHEDULED COMPLETION DATE		ESTIMATED COST																												
Appropriation & Subhead		Object Class.	Bureau Control No.	Sub-allot.	Authorization Acct'g Acty	Trans Type	Property Acct'g Acty	Cost Code	FUNDING AUTHORIZATION																													
									BASIC REQN NO.		AMOUNT																											
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>																																						
QTY. <i>(specify shts, sets, etc.)</i>		PAGES	QTY. WILL LAST MOS.		JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO		JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A RE-PRINT		LAST JOB NO.																													
ENCLOSURES <i>(Submit clean, well protected copy)</i> <i>(If other, specify)</i>						PROOFS <i>(Specify only if necessary)</i>																																
PAGES COPY		NEGA-TIVES		PLATES		<input type="checkbox"/> NOT REQ'D		SEND TO:																														
SPECIFICATIONS	FINISHED SIZE X		MARGINS <i>(Top)</i> <i>(Left/Bind)</i>		INK <i>(if not black)</i>		GRADE OF PAPER*		WEIGHT*		COLOR*																											
	FOLD TO <i>(Size)</i> X		PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>				1.																															
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.		WIRE STITCH <i>(Staple)</i> Number Stitches: <input type="checkbox"/> UPPER LEFT <input type="checkbox"/> TOP <input type="checkbox"/> OTHER <i>(Specify)</i>				2.																															
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE SIDE		OTHER <i>(Number)</i> <i>(Diameter)</i> <i>(Ctr. to ctr.)</i> <i>(Location)</i>				3.																															
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY		PAD <i>(Location)</i> SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT		PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO		4.																															
	COMPOSING/PROCESSING <i>(Prepare/after copy; fotolist; offset; etc.)</i>		WRAP <i>(No. per pkg.)</i>				5.																															
							6.																															
								7.																														
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="text-align: center;">FOR PLANT USE ONLY</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NUMBER ORIG.</td> <td>LINE H.T.</td> <td rowspan="10"></td> </tr> <tr> <td colspan="2">IMAGE SIZE X</td> </tr> <tr> <td>PRESS</td> <td>PLATES</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr> <td colspan="2">PRESS SHEET SIZE X</td> </tr> <tr> <td colspan="2">TRIM SIZE X</td> </tr> <tr> <td colspan="2">PLANNED BY</td> </tr> </table> </div> <div style="width: 35%;"> <p style="text-align: center;">SPECIAL INSTRUCTIONS/REMARKS</p> <p>SERIAL NUMBERING, REGISTRATION, ETC.</p> </div> </div>												NUMBER ORIG.	LINE H.T.		IMAGE SIZE X		PRESS	PLATES															PRESS SHEET SIZE X		TRIM SIZE X		PLANNED BY	
NUMBER ORIG.	LINE H.T.																																					
IMAGE SIZE X																																						
PRESS	PLATES																																					
PRESS SHEET SIZE X																																						
TRIM SIZE X																																						
PLANNED BY																																						
ORDERING OFFICE <i>(If other than delivery address)</i>							DELIVER TO <i>(Complete address)</i>																															
LIASON OFFICE APPROVAL <i>(Signature and date)</i>																																						
APPROVING OFFICE <i>(Signature and date)</i>																																						
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>																																						
<div style="border: 1px solid black; height: 100px; position: relative;"> <div style="position: absolute; top: 10px; left: 10px;">┌</div> <div style="position: absolute; top: 10px; right: 10px;">┐</div> <div style="position: absolute; bottom: 10px; left: 10px;">└</div> <div style="position: absolute; bottom: 10px; right: 10px;">┘</div> </div>							DISTRIBUTION REQUIRED <input type="checkbox"/> LIST <input type="checkbox"/> LABELS ATTACHED																															
							WILL PICKUP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD																															
							MATERIAL RECEIVED <i>(Signature and date)</i>																															